

ARROWHEAD REGIONAL MEDICAL CENTER



**ARROWHEAD REGIONAL MEDICAL CENTER
SUMMARY**

<u>ENTERPRISE FUNDS</u>	<u>Page #</u>	<u>Requirements</u>	<u>Sources</u>	<u>Net Budget</u>	<u>Staffing</u>
ARROWHEAD REGIONAL MEDICAL CENTER	228				
ARROWHEAD REGIONAL MEDICAL CENTER	232	450,920,892	442,423,843	(8,497,049)	3,691
MEDICAL CENTER LEASE PAYMENTS	240	42,049,251	42,049,251	0	0
TOTAL ENTERPRISE FUNDS		<u>492,970,143</u>	<u>484,473,094</u>	<u>(8,497,049)</u>	<u>3,691</u>



ARROWHEAD REGIONAL MEDICAL CENTER

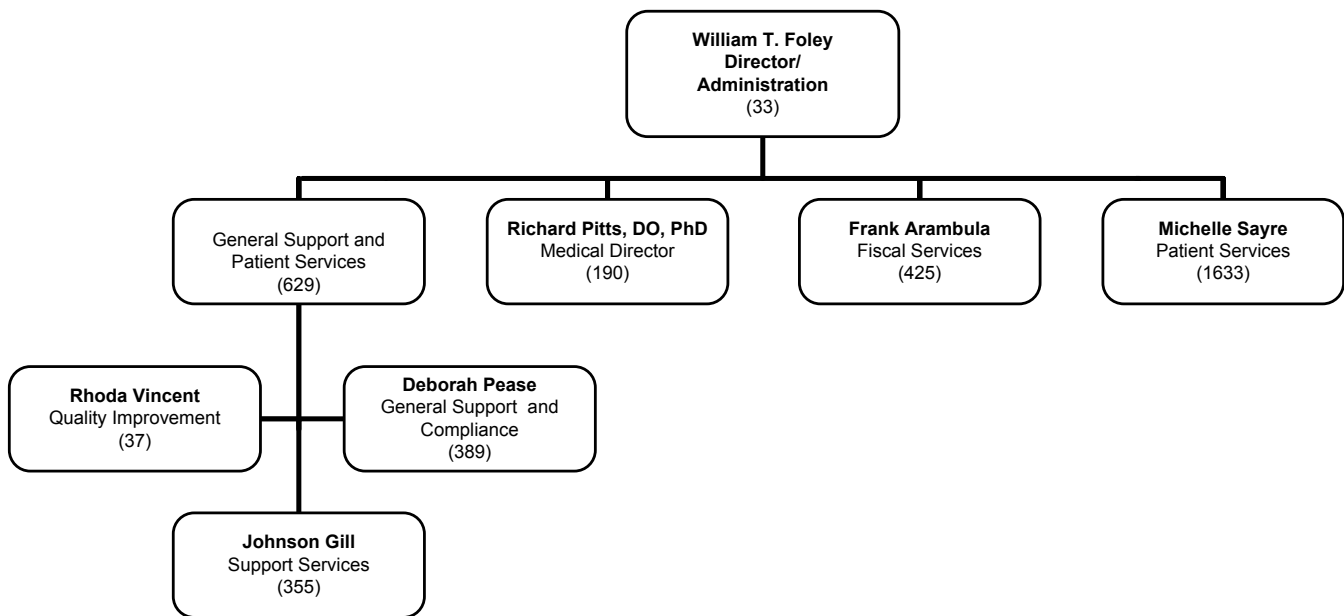
William T. Foley

DEPARTMENT MISSION STATEMENT

The San Bernardino County Arrowhead Regional Medical Center is a safety net hospital with the primary mission of providing quality healthcare—a basic necessity of humankind—to the residents of San Bernardino County. We continuously strive to improve the health of the communities we serve and become the provider of choice for the healthcare delivery and education.



ORGANIZATIONAL CHART



2013-14 ACCOMPLISHMENTS

- Transitioned 39,173 San Bernardino County residents from ArrowCare, Arrowhead Regional Medical Center's (ARMC) health plan for the uninsured, to the Medi-Cal program, exceeding the goal of transitioning 20,000 residents.
- Implemented 68 Delivery System Reform Incentive Program (DSRIP) milestones to improve population health management for ARMC patients, resulting in achieving 95% of the associated funding for Demonstration Year 8, a total of \$39.6 million.
- Reduced the use of high-cost outside agency (nurse registry) staff by \$1.0 million, a 20% reduction from the prior year.
- Received the "Get with the Guidelines" Stroke Program Silver Plus Quality Achievement Award from the American Heart Association In February 2014.
- Implemented Computerized Practitioner Order Entry in the Medical-Surgical Units (August 2013) and in the Behavioral Health Units (March 2014).
- Partnered with the Public Health and Behavioral Health departments in the development of the Community Vital Signs project. This project collected and compiled data from County respondents regarding various health indicators.



- Co-sponsored the 2013 Live Well, Age Well Summit, in November 2013. The Summit brought together leaders and stakeholders from various businesses and services to formulate the structure for sustainable health improvement in our communities.
- Hired 345 new employees into various positions for the delivery of care.
- Supported clinical training programs to provide skilled healthcare professionals for the County. A total of 178 physician residents participated in ARMC's Graduate Medical Education (GME) Residency Program. Fifty-four physician residents graduated in June 2013 and 54 incoming residents joined the GME program throughout the year. Nearly 2,000 nursing and allied health professional students were trained at ARMC.
- Implemented six LEAN projects designed to improve processes and outcomes for hospital acquired pressure ulcers, Emergency Department blood culture labeling, sepsis, stroke education, urine contamination rates, and medication administration.
- Completed regulatory accreditation surveys conducted by Healthcare Facilities Accreditation Program (HFAP), Centers for Medicare & Medicaid Services (CMS), College of American Pathologists (CAP), California Department of Public Health (CDPH), and received accreditation.



COUNTY GOALS AND OBJECTIVES AND DEPARTMENT PERFORMANCE MEASURES

COUNTY GOAL: IMPROVE COUNTY GOVERNMENT OPERATIONS

Objective(s): • *Monitor and evaluate operations and implement strategies to continually improve efficiency and effectiveness.*

Department Strategy:

- *Utilize specific methodologies as defined in ARMC's Quality Assessment and Performance Improvement Plan (such as LEAN Kaizens), focusing on key patient related processes to increase patient satisfaction and improve operational efficiencies and effectiveness.*
- *Improve patient satisfaction through the use of selected tools and techniques involving hospital employees and medical staff, including hourly rounding on patients, discharge phone calls, and specialty training.*

Measurement	2012-13 Actual	2013-14 Target	2013-14 Actual	2014-15 Target
Number of clinical or operational processes reviewed.	2	N/A	6	8
ARMC patient satisfaction percentile (overall rating)	69%	72%	69%	75%

COUNTY GOAL: PROVIDE FOR THE HEALTH AND SOCIAL SERVICES NEEDS OF COUNTY RESIDENTS

Objective(s): • *Maximize the utilization of Federal and State programs and funding to address the needs of County residents.*

Department Strategy:

- *Achieve Delivery System Reform Incentive Program (DSRIP) goals through clinical improvement of specific patient outcomes. DSRIP is a five year program with Federal funding proportionally tied to target attainment. DSRIP milestones change annually and become increasingly difficult and more complex.*

Measurement	2012-13 Actual	2013-14 Target	2013-14 Actual	2014-15 Target
Percentage of DSRIP milestones achieved.	97%	N/A	97.4%	90%

COUNTY GOAL: OPERATE IN A FISCALLY-RESPONSIBLE AND BUSINESS-LIKE MANNER

Objective(s): • *Live within our means, fully funding the maintenance of infrastructure and facilities, the provision of state-of-the-art basic operating systems, liabilities, and reserves; while forming capital to strategically invest in the future.*

Department Strategy:

- *Reduce the use of high-cost outside agency (nurse registry) staff, while maintaining required staffing standards through a daily review process.*

Measurement	2012-13 Actual	2013-14 Target	2013-14 Actual	2014-15 Target
Nursing registry dollars spent.	\$5.0M	N/A	\$3.5M	\$3.0M



SUMMARY OF BUDGET UNITS

2014-15						
	Requirements	Sources	Net County Cost	Fund Balance	Net Budget	Staffing
Enterprise Funds						
Arrowhead Regional Medical Center	450,920,892	442,423,843			(8,497,049)	3,691
Medical Center Lease Payment	42,049,251	42,049,251			0	0
Total Enterprise Funds	492,970,143	484,473,094			(8,497,049)	3,691
Total - All Funds	492,970,143	484,473,094	0	0	(8,497,049)	3,691

5-YEAR REQUIREMENTS TREND

	2010-11	2011-12	2012-13	2013-14	2014-15
Arrowhead Regional Medical Center	396,466,556	424,928,026	449,050,180	519,904,559	450,920,892
Medical Center Lease Payments	43,790,480	41,825,808	42,090,345	43,150,014	42,049,251
Total	440,257,036	466,753,834	491,140,525	563,054,573	492,970,143

5-YEAR SOURCES TREND

	2010-11	2011-12	2012-13	2013-14	2014-15
Arrowhead Regional Medical Center	402,444,177	419,710,182	441,129,372	511,552,377	442,423,843
Medical Center Lease Payments	42,988,659	41,825,808	42,090,345	43,150,014	42,049,251
Total	445,432,836	461,535,990	483,219,717	554,702,391	484,473,094

5-YEAR NET BUDGET TREND

	2010-11	2011-12	2012-13	2013-14	2014-15
Arrowhead Regional Medical Center	5,977,621	(5,217,844)	(7,920,808)	(8,352,182)	(8,497,049)
Medical Center Lease Payments	(801,821)	0	0	0	0
Total	5,175,800	(5,217,844)	(7,920,808)	(8,352,182)	(8,497,049)

Note: Beginning in fiscal year 2012-13, Capital Expenditures have been included and Depreciation has been excluded in Requirements in enterprise and internal service funds for budgetary purposes. In the table above, prior years have been restated for consistency.



Arrowhead Regional Medical Center

DESCRIPTION OF MAJOR SERVICES

Arrowhead Regional Medical Center (ARMC) is a state-of-the-art acute care facility embracing advanced technology in all patient and support areas. ARMC offers the latest in patient care by providing a full range of inpatient and outpatient services, community health centers (three offsite and one onsite), Behavioral Health inpatient services, and numerous specialty services. Freeway access, shuttle service and close proximity to an Omnitrans bus hub make ARMC convenient to County residents.

Budget at a Glance

Requirements Less Reimbursements*	\$450,920,892
Sources/Reimbursements	\$442,423,843
Net Budget	(\$8,497,049)
Estimated Unrestricted Net Assets	\$11,432,556
Use of Unrestricted Net Assets	\$8,497,049
Total Staff	3,691

*Includes Contingencies

ARMC and Behavioral Health facilities are comprised of a total of 456 inpatient beds (90 in the Behavioral Health unit and 366 in ARMC), most of which are private. The Emergency Department is a Level II Trauma Center and consists of 15 observation rooms, 8 treatment rooms, 3 law enforcement holding rooms, 8 trauma rooms and a 9 bay Rapid Medical Emergent Treatment area to expedite treatment and improve throughput. The helicopter landing area can accommodate both standard Medi-Vac helicopters and military helicopters. The outpatient care center consists of 109 examination rooms and 8 procedure rooms.

The campus houses six buildings which also serve to outline the definitive services/medical center functions: Acute Hospital, Behavioral Health Center, Outpatient Care Center, Diagnostic and Treatment Centers, Central Plant, and the Medical Office Building.

Inpatient Care: Inpatient services provide curative, preventative, restorative and supportive care for general and specialty units, within the General Acute Care and Behavioral Health Hospital. Care is coordinated among multiple care providers responsible for patient care twenty-four hours a day. Nursing functions as a primary interface with patients, families and others, and is often the interpreter for the hospital experience and treatment plan. A primary focus is Education, and ARMC offers Residency Programs for the training of physicians in Family Medicine, Emergency Medicine, Surgery, Neurosurgery, Women's Health, and Internal Medicine.

Outpatient Services: Outpatient Care is an integral part of our multifaceted healthcare delivery system offering a wide range of emergency, primary, preventive, chronic, follow-up and specialty care in an ambulatory care setting. Visits have exceeded 250,000 annually, exclusive of the Emergency Room volume. Mobile services have been expanded to one Mobile Clinic and two Breathmobile® units for a total of three mobile units. This allows clinical services to be delivered in outlying areas.

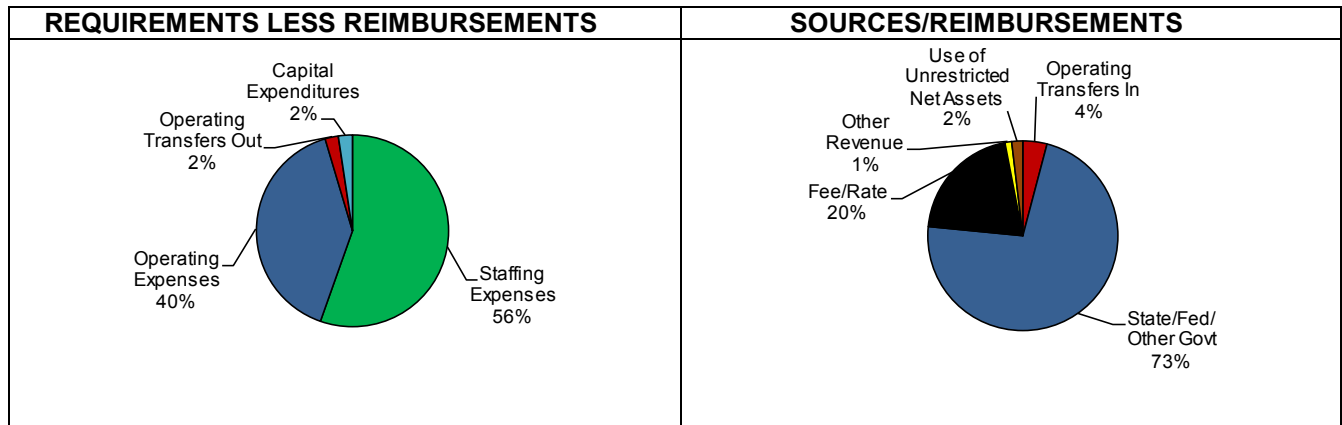
ARMC has worked diligently with the California Association of Public Hospitals to maximize funding for Medi-Cal and uninsured patients under Disproportionate Share and Safety Net Care Pool sources. These sources are provided primarily through the California section 1115 Waiver. The Waiver, implemented in November 2010, has been the funding source for substantial transformation and expansion of the Medi-Cal program at ARMC.

Under the Waiver, ARMC recently completed the two year requirement for the operation of the Low Income Health Plan (LIHP), which began January 1, 2012, and ended December 31, 2013. The County of San Bernardino created a collaborative of community stakeholders and County departments, including Behavioral Health, Human Services, and Public Health, that implemented the County's LIHP, ArrowCare.

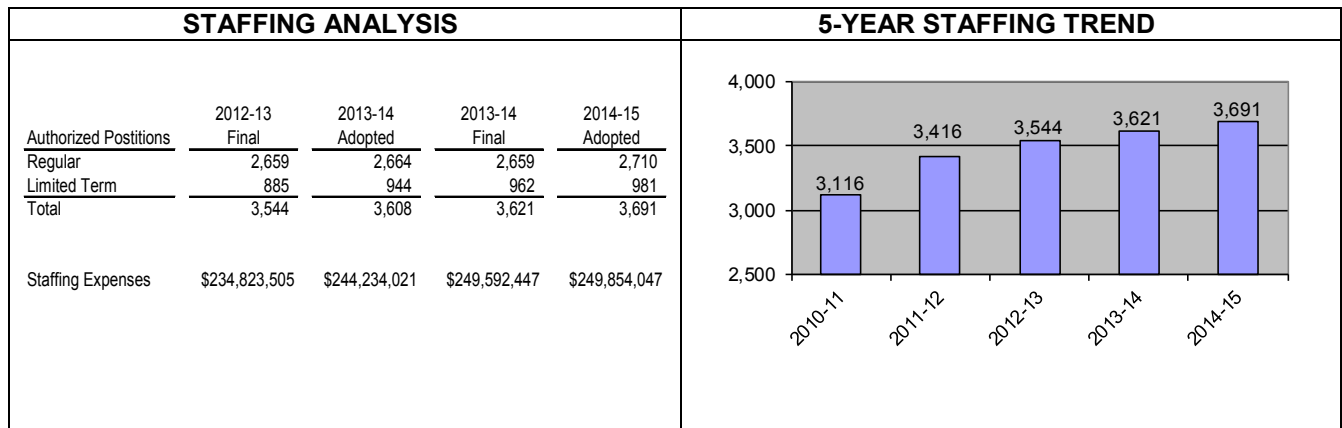
An additional funding source provided under the waiver, the Delivery System Reform Incentive Plan (DSRIP), has been an innovative approach to transforming existing delivery systems. The DSRIP has provided Infrastructure Development, Innovation Redesign, Population-Focused Improvement and Urgent Improvement in Quality and Safety. DSRIP funding is strictly tied to results and meeting transformation milestones. ARMC's DSRIP implemented 68 milestones to improve health management for ARMC patients, resulting in achieving 95% of the associated funding for Demonstration Year 8.



2014-15 ADOPTED BUDGET



BUDGETED STAFFING



ANALYSIS OF 2014-15 ADOPTED BUDGET

GROUP: Arrowhead Regional Medical Center
DEPARTMENT: Medical Center
FUND: Medical Center

BUDGET UNIT: EAD MCR
FUNCTION: Health and Sanitation
ACTIVITY: Hospital Care

	2010-11 Actual	2011-12 Actual	2012-13 Actual	2013-14 Actual	2013-14 Final Budget	2014-15 Adopted Budget	Change From 2013-14 Final Budget
Requirements							
Staffing Expenses	201,506,225	213,355,057	231,529,363	247,431,909	249,592,447	249,854,047	261,600
Operating Expenses	168,352,555	192,521,910	189,924,979	212,957,284	214,312,122	180,362,076	(33,950,046)
Capital Expenditures	2,627,788	10,585,537	5,363,315	5,320,736	6,918,566	10,692,236	3,773,670
Contingencies	0	0	0	0	0	0	0
Total Exp Authority	372,486,568	416,462,504	426,817,657	465,709,929	470,823,135	440,908,359	(29,914,776)
Reimbursements	(12,500)	(139,322)	(179,912)	0	0	0	0
Total Appropriation	372,474,068	416,323,182	426,637,745	465,709,929	470,823,135	440,908,359	(29,914,776)
Operating Transfers Out	9,808,735	8,230,697	9,618,819	10,821,308	49,081,424	10,012,533	(39,068,891)
Total Requirements	382,282,803	424,553,879	436,256,564	476,531,237	519,904,559	450,920,892	(68,983,667)
Sources							
Taxes	0	0	0	0	0	0	0
Realignment	0	0	0	0	0	0	0
State, Fed or Gov't Aid	297,112,802	291,865,158	317,139,276	290,522,623	348,171,588	326,772,943	(21,398,645)
Fee/Rate	89,696,625	97,178,302	91,177,192	130,957,219	88,464,564	92,065,054	3,600,490
Other Revenue	14,660,124	2,151,835	30,112,490	265,723	6,171,757	5,130,054	(1,041,703)
Total Revenue	401,469,551	391,195,295	438,428,958	421,745,565	442,807,909	423,968,051	(18,839,858)
Operating Transfers In	974,630	38,312,185	23,561	33,739,228	68,744,468	18,455,792	(50,288,676)
Total Sources	402,444,181	429,507,480	438,452,519	455,484,793	511,552,377	442,423,843	(69,128,534)
Net Budget*	20,161,378	4,953,601	2,195,955	(21,046,444)	(8,352,182)	(8,497,049)	(144,867)
				Budgeted Staffing	3,621	3,691	70

*Net Budget reflects Total Sources less Total Requirements for Internal Service and Enterprise funds. When Net Budget is negative, it means that the department will be using assets that have been carried over from the prior year.

NOTE: The 2013-14 Actual Net Budget of (\$21,046,044) reflects the use of unrestricted net assets due to a \$3.3 million one-time SBPEA incentive payment made to members within the department and a reduction of \$22.3 million in Realignment funding for regular operations (reflected as Operating Transfers In). The Realignment funds available to fund hospital operations are being retained in the Health Realignment fund for future needs due to the uncertainty of health care reform.

MAJOR EXPENDITURES AND REVENUE IN 2014-15 ADOPTED BUDGET

Staffing expenses of \$249.9 million fund 3,691 budgeted positions. Operating expenses of \$180.4 million are comprised primarily of medical supplies, physician fees, purchased medical services, external provider care services, insurance, utilities, and rent expense. Capital expenditures of \$10.7 million fund needed clinical and non-clinical equipment purchases.

Operating transfers out of \$10.0 million primarily represents costs budgeted for debt service in the amount of \$8.0 million. The remaining \$2.0 million represents costs for construction projects, which are being managed by the Architecture and Engineering department.

Total revenue of \$424.0 million includes \$326.8 million in state and federal funding primarily from Medicare and Medi-Cal; \$92.1 million in current services from private pay patients and insurance; and \$5.1 million in other revenue from cafeteria sales, interest, miscellaneous grants, and services provided to other County departments and hospitals through the residency program.

Operating transfers in of \$18.5 million represents the portion of Health Realignment allocated to ARMC. The expansion of Medi-Cal that took place in January 2014 has decreased the amount of uninsured patients thus impacting the amount of Realignment the County receives for healthcare costs incurred on uninsured patients.



BUDGET CHANGES AND OPERATIONAL IMPACT

During 2013-14, ARMC responded to the biggest payer change in its history due to the Affordable Care Act (ACA), effective January 1, 2014. Due to the uncertainty of the impact of the ACA, requirements and sources are budgeted conservatively in the 2014-15 budget.

Requirements are decreasing by \$69.0 million. This is primarily due to a decrease of \$34.0 million in operating expenses, due to less than anticipated patient volumes as a result of the Affordable Care Act and the conclusion of the Low Income Health Program (LIHP) and its associated costs. Capital expenditures are increasing by \$3.8 million due to equipment replacement needs. Operating transfers out are decreasing by \$39.1 million due to a one-time repayment in 2013-14 of an overpayment of 2011-12 and 2012-13 Disproportionate Share (DSH) revenues and the completion of various capital projects.

Sources are decreasing by \$69.1 million primarily due to a decrease in state, federal, and other revenues of \$22.4 million as a result of the Affordable Care Act and the loss of a portion of LIHP patients to other providers. This is offset by a \$3.6 million increase in fee for service revenues. Realignment revenues (received as operating transfers in) are decreasing by \$50.3 million as a result of one-time funding in 2013-14 to repay the state for a 2011-12 and 2012-13 DSH revenue overpayment, as well as a reduction in anticipated revenues as a result of AB 85 legislation. This legislation requires a redirection of a portion of realignment revenues to offset state costs for CalWORKS since counties will receive more federal funding for health services through Medi-Cal expansion.

STAFFING CHANGES AND OPERATIONAL IMPACT

Staffing expenses of \$249.9 million fund 3,691 budgeted positions of which 2,710 are regular positions and 981 are limited term positions. The 2014-15 budget includes a net increase of 70 positions (addition of 111, deletion of 41). This includes a net increase of 52 regular positions and 18 limited term positions to address existing operational needs related to regulatory requirements, quality improvement, and to maintain staffing ratios based on volume. Twenty one Registered Nurse IIs and 14 Registered Nurse II-Per Diems have been added to reduce overtime and nurse registry usage. Fifteen limited term Custodians were added to ensure proper coverage to address cleanliness in the hospital.

A total of 111 positions are added to the budget (65 regular, 46 limited term) as follows:

Additions

Accounting Technician (1 regular)	Lead Physical Therapist (1 regular)
Administrative Supervisor I (1 regular)	Lead Speech Therapist (1 regular)
Assistant Manager-Laboratory (1 regular)	Licensed Vocational Nurse II (4 regular)
Assistant Manager-Medical Imaging (1 regular)	LVN II-Per Diem (3 limited term)
Assistant Manager-Nutrition Services (1 regular)	Mental Health RN II (7 regular)
Clinic Assistant (8 regular)	Nursing Attendant (3 regular)
Clinic Operations Supervisor (3 regular)	Office Assistant II (1 regular, 1 limited term)
Clinical Therapist I (2 regular)	Office Assistant III (1 regular, 2 limited term)
Contract Social Svc Practitioner (1 limited term)	Psychiatric Tech I (3 regular, 5 limited term)
Custodian (15 limited term)	Registered Nurse II (21 regular)
Health Education Specialist II (2 regular)	Registered Nurse II-Per Diem (14 limited term)
Health Info Mgmt Assistant I (3 limited term)	Social Service Practitioner (1 regular)
Hospital Unit Assistant (1 regular, 2 limited term)	Staff Analyst II (1 regular)

A total of 41 vacant positions have been deleted (13 regular, 28 limited term) based an operational assessment of staffing requirements.

Deletions:

Clinic Assistant (1 regular, 1 limited term)	Education Services Supervisor (1 regular)
Cont. Home Health Social Worker (2 limited term)	Float Pool RN-Per Diem (1 limited term)
Cont. Home Health Reg. Therapist (1 limited term)	Health Info Management Assistant I (1 regular)
Contract Social Service Practitioner (1 limited term)	Hospital Unit Assistant (2 regular)
Contract Ancillary Receivables Mgr (1 limited term)	Laboratory Technologist II (1 regular*)
Contract Arrowcare Medical Dir (1 limited term)	Licensed Vocational Nurse II (1 regular)
Contract Respiratory Care Pract (2 limited term)	LVN II-Per Diem (2 limited term)



Office Assistant II (1 regular, 1 limited term)
 Office Specialist (1 limited term)
 Public Service Employee (7 limited term)
 Registered Nurse II (3 regular)

Registered Nurse II-Per Diem (6 limited term)
 Security Technician I (1 regular)
 Student Nurse (1 limited term)
 Ultrasound Technologist II (1 regular*)

* These are technical corrections as position count was overstated in the 2013-14 budget due to job share.

Reclassifications are included in the budget to better align position classifications with assigned work duties. The majority of reclassifications are related to the Family Health Care Clinics moving toward the Population Health Management model, which focuses on the most acutely ill ambulatory patients to improve their care. Registered Nurse II-Clinic positions and Clinic Assistants are being reclassified to RN Care Managers and Care Assistants, respectively, to follow the Population Health Management model.

2014-15 POSITION SUMMARY

Division	Regular	Limited Term	Total	Filled	Vacant	New	Total
Administration	33	0	33	30	3	0	33
General Support and Patient Services	471	158	629	499	74	56	629
Medical Director	11	179	190	190	0	0	190
Fiscal Services	390	35	425	371	45	9	425
Patient Services	1,136	497	1,633	1,328	279	26	1,633
Quality Improvement	32	5	37	35	2	0	37
Support Services	318	37	355	312	28	15	355
General Support and Compliance	319	70	389	338	46	5	389
Total	2,710	981	3,691	3,103	477	111	3,691



Administration		Patient Services		Support Services	
Classification		Classification		Classification	
1 Administrative Analyst III		8 ARMC House Supervisor-Per Diem		2 Air Conditioning Mechanic	
1 ARMC Chief Operating Officer		16 Assistant Nurse Manager		2 Ambulatory Clinic Manager	
1 ARMC Medical Director		2 AsstHospAdmin-Nursing Svcs		1 ARMC Bldg Maint and Secty Mgr	
1 Director Arrowhead Reg Med Ctr		4 Burn Care Technician		1 ARMC Facilities Project Coord	
1 Executive Assistant		3 Certified Trauma Registrar		1 ARMC Safety Technician	
1 Executive Secretary II		1 Chief Nursing Officer		1 Assistant Manager-Environ Svcs	
1 Executive Secretary III -Class		12 Clinic Assistant		1 Assistant Manager-Facilities	
7 Fiscal Specialist		1 Clinical Nurse Specialist		1 Assoc Hosp Adm Professional Sv	
1 General Services Aide		4 Cont Surgical Tech		1 Asst Hosp Admin-Ambulatory Svc	
4 Office Assistant II		1 Education Services Supervisor		5 Bio-Medical Electronic Tech I	
1 Office Assistant III		30 Emergency Room Technician		1 Bio-Medical Electronic Tech II	
1 Office Specialist		2 Fiscal Assistant		5 Building Plant Operator	
1 Personnel Technician		5 Float Pool Regstrd Nurse-PDiem		3 Cont ARMC Security Technician	
7 Secretary I		1 Health Education Specialist II		154 Custodian I	
1 Secretary II		1 Hospital Employee Health Nurse		3 Custodian II	
1 Staff Analyst I		1 Hospital Services Worker		3 Electrician	
1 Staff Analyst II		81 Hospital Unit Assistant		7 General Maintenance Mechanic	
1 Supervising Fiscal Specialist		3 House Supervisor		4 General Maintenance Worker	
33 Total		3 Lic Vocational Nurse-Per Diem		2 General Services Aide	
		74 Licensed Vocational Nurse II		5 Hospital Plant Operator	
		1 Multimedia Coordinator		1 Hospital Services Worker	
		10 Nurse Educator		6 Linen Room Attendant	
		13 Nurse Manager		1 Maintenance Supervisor	
		3 Nurse Supervisor		1 Medical Center Hskpg/Linen Man	
		132 Nursing Attendant		33 Office Assistant II	
		4 Nursing Program Coordinator		2 Office Assistant III	
		4 Office Assistant II		3 Painter I	
		4 Office Assistant III		3 Plumber	
		353 Registered Nurse II - Per Diem		1 Registered Nurse II - Clinic	
		678 Registered Nurse II-ARMC		4 Secretary I	
		1 RegisteredCardioPulmonaryNurse		1 Secretary II	
		1 Respiratory Care Practitioner2		71 Security Technician I	
		4 Secretary I		10 Security Technician II	
		1 Secretary II		1 Staff Analyst II	
		31 Sterile Processing Technician		1 Stores Specialist	
		4 SterileProcessingTechnician1		1 Supervising Office Specialist	
		2 SterileProcessingTechnician2		4 Supervising Security Technician	
		1 Stores Specialist		1 Supvg Bio Med Elect Tech	
		90 Student Nurse		7 Supvg Custodian	
		1 Supvg Sterile ProcessingTech		355 Total	
		14 Surgical Technician			
		23 Telemetry Technician			
		4 Ultrasound Technologist II			
		1 Utilization Review Technician			
		1633 Total			



Medical Director		General Support and Patient Services		Fiscal Services	
Classification		Classification		Classification	
1	Administrative Supervisor I	1	ARMC Patient Navigator	5	Accountant III
1	Cont Resident PGY III	1	AsstHospAdm-BehavioralHealth	5	Accounting Technician
13	Cont Resident PGY IV	1	Ast Dir of Respiratory Care Sv	2	Administrative Supervisor I
3	Cont Resident PGY V	51	Care Assistant	2	Administrative Supervisor II
143	Cont Resident PGY VI	51	Clinic Assistant	8	Applications Specialist
19	Cont Resident PGY VII	3	Clinic Operations Supervisor	1	ARMC Chief Financial Officer
6	Education Specialist	3	Clinic Supervisor-ARMC	1	ARMC Medical Svcs Prgrm Coord
1	Office Assistant II	11	Clinical Therapist I	1	ARMC Social Services Manager
1	Secretary I	1	Clinical Therapist II	1	Ast Hosp Administrator Fiscal
1	Staff Analyst I	1	Clinical Therapist Pre-License	10	Automated Systems Analyst I
1	Statistical Analyst	1	Cont Occupational Therapist II	1	Automated Systems Analyst II
190	Total	35	Cont Resp Care Prac II	9	Automated Systems Technician
		1	Director of Respiratory Care Svcs	2	Business Applications Manager
		13	RN Care Manager	1	Business Systems Analyst I
		1	General Services Worker II	4	Business Systems Analyst II
		3	Health Education Specialist II	3	Business Systems Analyst III
		1	Health Services Assistant I	1	Case Management Coordinator
		1	Hospital Risk Coordinator	2	Case Management Supervisor
		1	Hospital Services Worker	1	Chargemaster Analyst
		29	Hospital Unit Assistant	1	Chief Medical Informtn Officer
		2	House Supervisor	9	Collections Officer
		18	Lic Vocational Nurse-Per Diem	1	Cont Interim Medical Rec Sup
		58	Licensed Vocational Nurse II	6	Cont Medi-Cal Specialist
		1	Licensed Vocational Nurse III	5	Cont Social Srv Practitioner
		1	Mental Health Clinic Supervisor	1	Cont. Asst. Hosp. Admin-Fiscal
		54	Mental Health Nurse II	1	Cont. Asst. Hosp. Adm-Pnt Fisc
		4	Mental Health Nurse Mgr-ARMC	1	ContManagerPreMediCalQualDept
		2	Neurodiagnostic Technolgst II	1	ContSpvsrPreMediCalQualDept
		1	Neurodiagnostic Technologist	2	Departmental IS Administrator
		1	Nurse Educator	26	Fiscal Assistant
		48	Nursing Attendant	6	Fiscal Specialist
		2	Occupational Therapist II	1	General Services Aide
		3	Occupational Therapy Assistant	53	Health Info Mgmt Assistant I
		18	Office Assistant II	7	Health Info Mgmt Assistant II
		10	Office Assistant III	2	Health Info Mgmt Assistant III
		1	Office Specialist	1	Licensed Vocational Nurse II
		1	Oral Surgery Technician	1	Material Manager
		4	Orthopedic Technician	12	Medical Records Coder I
		1	Patient Navigation Prgm Coord.	7	Medical Records Coder II
		49	Psychiatric Technician I	1	Medical Records Manager
		1	Pulmonary Function Specialist	2	Medical Records Supervisor
		16	Registered Nurse II - Clinic	28	Office Assistant II
		71	Registered Nurse II - Per Diem	79	Office Assistant III
		1	Registered Nurse II-ARMC	5	Office Assistant IV
		27	Respiratory Care Practitioner2	18	Office Specialist
		6	Respiratory Therapist	2	Patient Accounts Supervisor
		1	RespiratoryCarePractitioner2	1	Programmer Analyst I
		2	RespiratoryCarePractitioner3	1	Programmer Analyst II
		3	Secretary I	3	Public Service Employee
		1	SterileProcessingTechnician1	21	Registered Nurse Case Manager
		1	Supervising Office Assistant	1	Registered Nurse II - Per Diem
		8	Supvg Respiratory Care Practit	4	Registered Nurse II-ARMC
		2	Util Rvw/Perform Imp Nurse	11	RN Case Manager-Per Diem
		629	Total	3	Secretary I
				10	Social Service Practitioner
				1	Staff Analyst I
				6	Staff Analyst II
				4	Storekeeper
				1	Stores Specialist
				3	Supervising Office Assistant
				2	Supervising Office Specialist
				1	Supvg Auto Systems Analyst I
				3	Supvg Health Info Mgmt Assist
				1	Supvg Utilization Review Techn
				1	Systems Support Analyst II
				8	Utilization Review Technician
				425	Total



Classification

1 Assoc Hosp Adm Professional Se
 1 AsstHospAdmin-Nursing Svcs
 1 Ast Hosp Administrator Fiscal
 1 Biostatistician
 1 Cont Mktg&Bus Dev Coord -ARMC
 1 Librarian II
 1 Library Assistant I
 1 Lic Vocational Nurse-Per Diem
 4 Licensed Vocational Nurse II
 1 Media Specialist
 2 Medical Staff Coordinator
 1 Nurse Epidemiologist
 2 Office Assistant II
 3 Office Specialist
 1 Photographer
 1 Quality Improvemnt Coordinator
 2 Registered Nurse II - Per Diem
 2 Registered Nurse II-ARMC
 1 Secretary II
 1 Spvg Medical Staff Coordinator
 1 Staff Analyst II
 2 Tumor Registrar
 5 Util Rvw/Perform Imp Nurse
 37 Total

Classification

1 Administrative Supervisor I
 1 ARMC Ethics & Compliance Coord
 1 ARMC Executive Chef
 1 ARMC Laboratory Manager
 1 Assistant Manager-Laboratory
 1 Assistant Manager-Medical Imaging
 1 Assistant Manager-Nutrition Svcs
 1 Assoc Hosp Adm Professional Se
 1 Autopsy Assistant
 4 Clinic Assistant
 1 Compliance Specialist
 1 Cont First Five Public Ed Cord
 4 Cont Occupational Therapist II
 12 Cont Physical Therapist II
 19 Cont Radiological Tech
 4 Cont Rehab Therapist - Speech
 6 Cont Spec Procedures Rad Tech
 3 Cont Ultrasound Tech
 6 Cook I
 10 Cook II
 3 Cook III
 3 Cytotechnologist
 4 Dietary Services Supervisor
 3 Dietetic Technician
 10 Dietitian
 1 First Five Contract Dentist
 1 First Five Project Director
 2 Fiscal Assistant
 31 Food Service Worker I
 13 Food Service Worker II
 3 General Services Aide
 2 Histology Technician
 1 Hospital Customer Advocate
 19 Laboratory Assistant
 31 Laboratory Technologist II
 7 Laboratory Technologist III
 3 Laboratory Technologist Intern
 1 Lead Occupational Therapist
 1 Lead Physical Therapist
 1 Lead Speech Therapist
 2 Nuclear Medicine Technologist
 5 Occupational Therapist II
 2 Occupational Therapy Assistant
 34 Office Assistant II

Classification

3 Office Assistant III
 2 Office Assistant IV
 3 Office Specialist
 27 Phlebotomist
 3 Physical Therapist Assistant
 11 Physical Therapist II
 1 Privacy & Compliance Specialst
 1 Radiographic Clinical Instruct
 15 Radiologic Technologist II
 3 Radiologic Technologist III
 1 Radiologic Technologist School
 1 Radiology Manager
 1 Radiology Supervisor
 1 Registered Nurse II - Per Diem
 5 Registered Nurse II-ARMC
 4 Rehabilitation Services Aide
 1 Rehabilitation Services Manag
 4 Secretary I
 1 Secretary II
 13 Special Proc Rad Technolog 2
 3 Special Proc Rad Technolog 3
 2 Speech Therapist
 1 Staff Analyst I
 1 Staff Analyst II
 1 Stores Specialist
 1 Supervising Office Assistant
 1 Supervising Phlebotomist
 1 Supv Rehabilitation Therapist
 1 Supvg Dietitian
 6 Supvg Laboratory Technologist
 5 Ultrasound Technologist II
 1 Ultrasound Technologist III
 1 Util Rvw/Perform Imp Nurse
 1 Volunteer Services Coordinator
 389 Total



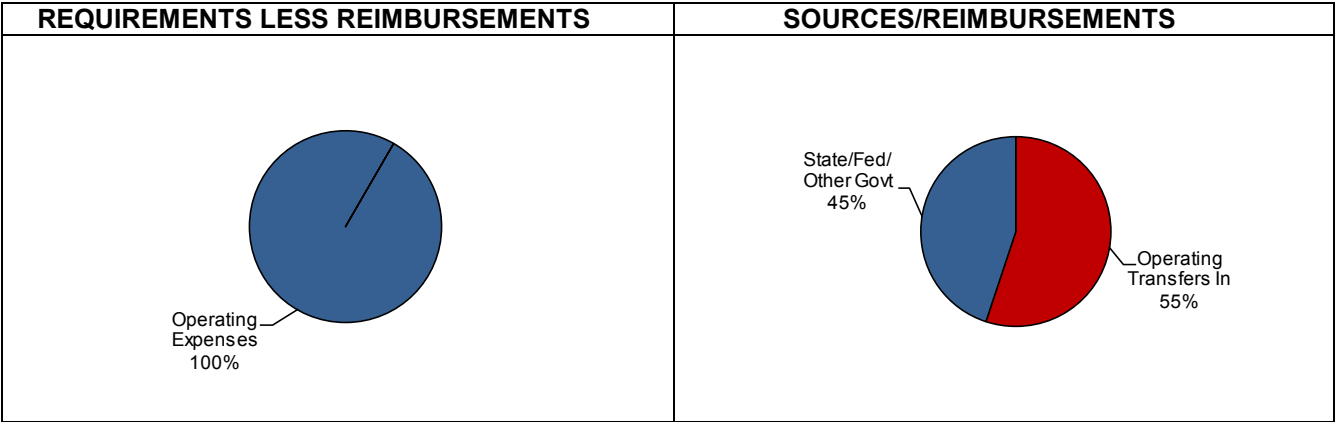
Medical Center Lease Payments

DESCRIPTION OF MAJOR SERVICES

This budget unit funds the cost of long-term lease payments to the Inland Empire Public Facilities Corporation for the Arrowhead Regional Medical Center (ARMC) facility. Funding sources include state revenues from the Construction Renovation/Reimbursement Program (SB 1732). This program provides supplemental reimbursement for construction, renovation, or replacement of medical facilities or fixed equipment. Other funding sources are operating transfers from ARMC consisting of Medicare and fee for service revenues, and operating transfers from the general fund backed by Health Realignment revenues and tobacco settlement proceeds.

Budget at a Glance	
Requirements Less Reimbursements*	\$42,049,251
Sources/Reimbursements	\$42,049,251
Net Budget	\$0
Estimated Unrestricted Net Assets	\$0
Use of Unrestricted Net Assets	\$0
Total Staff	0
*Includes Contingencies	

2014-15 ADOPTED BUDGET



ANALYSIS OF 2014-15 ADOPTED BUDGET

GROUP: Arrowhead Regional Medical Center
 DEPARTMENT: Arrowhead Regional Medical Center
 FUND: Medical Center Lease Payments

BUDGET UNIT: EMD JPL
 FUNCTION: General
 ACTIVITY: Property Management

	2010-11 Actual	2011-12 Actual	2012-13 Actual	2013-14 Actual	2013-14 Final Budget	2014-15 Adopted Budget	Change From 2013-14 Final Budget
Requirements							
Staffing Expenses	0	0	0	0	0	0	0
Operating Expenses	42,988,658	41,526,830	41,657,396	42,279,632	43,150,014	42,049,251	(1,100,763)
Capital Expenditures	0	0	0	0	0	0	0
Contingencies	0	0	0	0	0	0	0
Total Exp Authority	42,988,658	41,526,830	41,657,396	42,279,632	43,150,014	42,049,251	(1,100,763)
Reimbursements	0	0	0	0	0	0	0
Total Appropriation	42,988,658	41,526,830	41,657,396	42,279,632	43,150,014	42,049,251	(1,100,763)
Operating Transfers Out	0	0	0	0	0	0	0
Total Requirements	42,988,658	41,526,830	41,657,396	42,279,632	43,150,014	42,049,251	(1,100,763)
Sources							
Taxes	0	0	0	0	0	0	0
Realignment	0	0	0	0	0	0	0
State, Fed or Gov't Aid	19,500,334	18,820,181	18,901,369	21,247,254	19,063,823	18,877,576	(186,247)
Fee/Rate	0	0	0	0	0	0	0
Other Revenue	0	0	769,768	2,887	0	0	0
Total Revenue	19,500,334	18,820,181	19,671,137	21,250,141	19,063,823	18,877,576	(186,247)
Operating Transfers In	23,488,324	22,706,649	21,986,259	21,029,491	24,086,191	23,171,675	(914,516)
Total Sources	42,988,658	41,526,830	41,657,396	42,279,632	43,150,014	42,049,251	(1,100,763)
Net Budget*	0	0	0	0	0	0	0
				Budgeted Staffing	0	0	0

*Net Budget reflects Total Sources less Total Requirements for Internal Service and Enterprise funds. When Net Budget is negative, it means that the department will be using assets that have been carried over from the prior year.

MAJOR EXPENDITURES AND REVENUE IN 2014-15 ADOPTED BUDGET

Operating expenses of \$42.0 million represent lease payments and associated fees and expenses.

State, federal, or government aid revenue of \$18.9 million is from the state's Construction Renovation/Reimbursement Program (SB 1732). The amount reimbursed by the state depends on the allowable portion of the lease payments multiplied by a rate that is calculated by the state every year. The rate fluctuates based on actual Medi-Cal inpatient days paid to ARMC.

Operating transfers in of \$23.2 million are funded by \$10.7 million of Tobacco Master Settlement Agreement monies, \$4.5 million of Health Realignment funds, and \$8.0 million in revenues anticipated to be generated by ARMC.

BUDGET CHANGES AND OPERATIONAL IMPACT

Requirements are decreasing by \$1.1 million primarily due to reduced costs associated with a payment of rebate to the federal government in 2013-14 which will not recur in 2014-15, resulting in a reduction of sources needed to meet requirements.

STAFFING CHANGES AND OPERATIONAL IMPACT

There is no staffing associated with this budget unit.



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